



Rental Application

ANSWER ALL QUESTIONS
 PRINT CLEARLY IN INK
 PRINT OUT ON LEGAL SIZE PAPER

IMPORTANT: In order to process your application as quickly as possible. Please make sure that all questions are answered on this application. Credit information is confidential and for our office files only. Approval or rejection of this application can only be given by the Property Management Department at the Home Office of the company, 919 So.Winton Road, Rochester, NY 14618.

Office Use Only	Address (of apt. applying for)			Bldg.#		Apt.#	
	Lease to Commence			Term of Lease			Mthly Rental
Applicant Information	Name of Applicant (<i>Print</i>)			Date of Birth		Phone	
	Have you, or any prospective occupant, ever been convicted of a felony?	Yes		No			
	Social Security Number			Do you own cat(s)?			
	Present Address	Street			Years there		
	E-Mail		City		State		Zip
	Name of Present Landlord			Phone			
	Landlord Address						
	Previous Address	Street			Years there		
		City		State		Zip	
	Name of Employer			Job Title			
	Employer Address			Phone /Ext			
	Income	\$		Years worked for this employer			
	If less than 1 yr, name of Previous Employer						
	Children's Names & DOB <i>(to occupy premises)</i>	1st Name		Date of Birth			
		2nd Name		Date of Birth			
	YOUR Parents Name or Closest Relative			Phone			
	Address	Street			Years there		
		City		State		Zip	
	Car Information	Year / Make		Lic.#		State	
	2nd Applicant Information	Name 2nd Applicant (<i>Print</i>)			Date of Birth		Phone
Have you, or any prospective occupant, ever been convicted of a felony?		Yes		No			
Social Security Number							
Present Address		Street			Years there		
		City		State		Zip	
Name of Present Landlord				Phone			
Landlord Address							
Previous Address		Street			Years there		
		City		State		Zip	
Name of Employer				Job Title			
Employer Address				Phone /Ext			
Income		\$		Years worked for this employer			
If less than 1 yr, name of Previous Employer							
Children's Names & DOB <i>(to occupy premises)</i>		1st Name		Date of Birth			
		2nd Name		Date of Birth			
2nd APPL.Parents Name or Closest Relative				Phone			
Address		Street			Years there		
		City		State		Zip	
Car Information		Year / Make		Lic.#		State	
\$		Amount of Deposit w/Application		Cash		Check	

I hereby authorize the person to whom this application is made, or any credit bureau or other investigative agency employed by such person, to investigate the references herein listed or statements or other data obtained from me or from any other person pertaining to my credit and financial responsibility. It is also agreed that the deposit with this application is non-refundable. However, in the event the applicant is not approved, his or her deposit shall be refunded in full within 30 days. If approved, applicant shall, within 7 days, following notification to him of such approval, sign landlord's standard lease, a copy of which has been furnished to the applicant, and the applicant and/or guarantor herein acknowledge that they have read said lease for the premises applied for; and if the applicant or guarantor fails to sign such leases herein provided, the application may be regarded by the landlord as being void and any deposit be forfeited. The applicant agrees at or before the signing of the lease that he shall pay Security Deposit specified. Guarantor to furnish name, address, and employment information on Guarantor Information form.

Applicant Signature _____ Date _____
 2nd Applicant Signature _____ Date _____